



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

SEP 03 2002

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TECH CENTER 1600/2900

Applicants: Walter H. Günzburg, David Winder and Robert M. Saller

Application No.: 08/999,690 Group: 1632

Filed: September 8, 1997 Examiner: Q. Li

For: Vectors Carrying Therapeutic Genes Encoding Antimicrobial Peptides For Gene Therapy

CERTIFICATE OF MAILING	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to Assistant Commissioner for Patents, P.O. Box 2327, Arlington, VA 22202	
on <u>Aug. 26, 2002</u>	<u>Betsy S. Kirschner</u>
Date	Signature
<u>Betsy S. Kirschner</u>	
Typed or printed name of person signing certificate	

Assistant Commissioner for Patents  
P.O. Box 2327  
Arlington, VA 22202

Sir:

Transmitted herewith is an Amendment for filing in the above-identified application.

[ ] Small entity status of this application under 37 C.F.R. 1.9 and 1.27 has been established by a Small Entity Statement previously submitted.

[ ] A Small Entity Statement to establish small entity status under 37 C.F.R. 1.9 and 1.27 is enclosed.

The fee has been calculated as shown below:

(COL. 1)	(COL. 2)	(COL. 3)
CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA
TOTAL 69	MINUS * 52	17
INDEP 13	MINUS ** 6	7
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM		

\* not fewer than 20

\*\* not fewer than 3

SMALL ENTITY	
RATE	ADDIT. FEE
X \$9	\$
X \$42	\$
+ \$140	\$

OTHER THAN SMALL ENTITY	
RATE	ADDIT. FEE
X \$18	\$ 306
X \$84	\$ 588
+ \$280	\$

OR

TOTAL = \$ 0

TOTAL = \$ 894

Please charge Deposit Account No. 08-0380 for the following fees:

<input type="checkbox"/>	Petition for [            ] month Extension of Time	\$	_____
<input type="checkbox"/>	Amendment Fee	\$	_____
<input type="checkbox"/>	Other Fees:		
	_____	\$	_____
	_____	\$	_____
	TOTAL:	\$	<u>0</u>

A check is enclosed in payment of the following fees:

<input checked="" type="checkbox"/>	Petition for four (4) months Extension of Time	\$	<u>1440</u>
<input checked="" type="checkbox"/>	Amendment Fee	\$	<u>894</u>
<input checked="" type="checkbox"/>	Other Fees:		
	Request for Continued Examination	\$	<u>740</u>
	_____	\$	_____
	TOTAL:	\$	<u>3074</u>

☒ A general authorization is hereby granted to charge Deposit Account No. 08-0380 for any fees required under 37 C.F.R. 1.16 and 1.17 in order to maintain pendency of this application. A copy of this authorization is enclosed for accounting purposes.

Respectfully submitted,

HAMILTON, BROOK, SMITH & REYNOLDS, P.C.

By Anne J. Collins  
Anne J. Collins  
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Concord, Massachusetts 01742-9133

Dated: August 26, 2002